## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)		FEC IDENTIFICATION NUMBER ▼
END THE GRIDLOCK		C C00519595
Check If Z 24-hour report 48-hour report Mew report Amends report filed on Amends report filed on Amends report 1 Amends repor		
Full Name (Last, First, Middle Initial) of Payee		P. I.
Waterfront Strategies		Date
Mailing Address 1010 Wisconsin Avenue, NW		11
0.1	7'- 0-4-	Amount
• *	tate Zip Code OC 20007	59662.50 Transaction ID : SE.4238
Purpose of Expenditure TV Advertising	Category/ Type	Office Sought: House State: NE
Name of Federal Candidate Supported or Opposed by	Evpondituro	President District: 00
DEBRA S FISCHER	-	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
		M M / D D / Y Y Y Y
Mailing Address		
Mailing Address		Amount
		Amount
City	tate Zip Code	
Purpose of Expenditure	Category/	Office Sought: House State:
	Type	Senate District:
Name of Federal Candidate Supported or Opposed by	Expenditure:	President
		Check One: Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: Primary General
for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		59662.50
(a) COBTOTAL OF HOMEZON HINOSPORMENT Exponditures		33002.30
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(c) TOTAL Independent Experiorations		59662.50
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
MICHAEL TUCKER	[Electronically Filed]	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date	11 01 2012